



VILLAGE OF BURR RIDGE

APPLICATION FOR

ZONING CERTIFICATE OF OCCUPANCY

Date _____

The Village of Burr Ridge Zoning Ordinance requires the issuance of a Zoning Certificate of Occupancy prior to occupancy of any non-residential building or tenant space. Application for a Zoning Certificate of Occupancy requires the completion of this form and a **\$50.00 application fee**. A Zoning Certificate of Occupancy certifies that the land use is permitted by the Village of Burr Ridge Zoning Ordinance but does not validate or legalize existing or future violations of the Village of Burr Ridge Municipal Code, Zoning Ordinance, or Building Codes. The Village of Burr Ridge reserves the right to enforce any and all such violations, now or in the future.

NAME OF BUSINESS:	
BUSINESS OWNER:	BUSINESS LOCATION & SUITE:
TELEPHONE:	

TYPE OF BUSINESS (Please provide a detailed description of the business activities that will take place at the above address. Attach additional information as needed. Please include information pertaining to types of goods produced or sold, services provided, number and types of clients/customers, and any other pertinent information that may be relevant in describing the business or establishment. Check all applicable types of businesses listed below.):

Industrial: ____ Manufacturing ____ Research ____ Warehouse ____ Other	Commercial: ____ Retail Sales ____ Retail Services ____ Restaurant ____ Other	Office: ____ Medical/Dental ____ Business ____ Professional ____ Other
This application is ____ New Business in Village ____ Relocation within Village For (check one): ____ Expansion of Business at Same Location ____ Other		
No. of Employees On Premises at Peak Occupancy: (for determining parking requirements)	Floor Area of Space to be Occupied:	
Number of On-Site Parking Spaces Available:	Number of Off-Street Loading Berths:	
Business Hours and Days:	Sales Tax ID No. (for retail only)	
Name of Business Previously Occupying Floor Space:		

BUSINESS CONTACT:

Name

Address

Daytime No. _____
Telephone No. _____

After Hours No. _____
For Police Emergency Purposes

PROPERTY OWNER:

Name

Telephone No. _____

Address

Please type or print all requested information. Allow one to two weeks for processing of the application form. The applicant will be contacted upon completion of the Village's review of this application. Failure to provide all information will delay processing.